



SUBSTANCE USE DISORDER
ALLY TRAINING HUB
Virginia Department of Social Services

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Racial Equity and SUD

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People helping people



Outline

- Background
 - History of racialized drug war
 - Substance use and disproportionate consequences
- Racial disproportionality
- How poverty relates to substance use and racial equity
- Racism in treatment and recovery
- Roles of DSS
- Individual and systemic bias
- Equitable approaches moving forward

History of the Racialized Drug War

- “War on drugs” largely driven by puritanical, moralistic values about drug use
- Substance use has been used to attack, disenfranchise those with concentrated disadvantages. For example,
 - Chinese Exclusion Act of 1882 drew on anti-opium sentiment to justify immigration bans,
 - Anti-cocaine laws targeted Black men,
 - Anti-marijuana laws targeted immigrants, politically liberal groups, and Latinx and Black communities
- One in 13 Black Americans of voting age have a felony and are excluded from voting

History of the Racialized Drug War

- President Nixon leveraged the war on drugs to attack political opponents
- John Ehrlichman, President Nixon's counsel and Assistant to the President for Domestic Affairs, admitted:
 - “You want to know what this was really all about. The Nixon campaign in 1968, and the Nixon White House after that, had two enemies: the antiwar left and Black people. You understand what I’m saying. **We knew we couldn’t make it illegal to be either against the war or Black, but by getting the public to associate the hippies with marijuana and Blacks with heroin, and then criminalizing both heavily, we could disrupt those communities.**”

History of the Racialized Drug War

- Drug use rates have not changed significantly in this country in the past several decades.
- However, there are significant disparities in punitive consequences for SUD:
 - African and Black Americans and Latinx individuals have higher rates of imprisonment due to substance use, lower access to treatment, and generally receive worse care.
- People of color are less likely to be identified as having a mental health problem and less likely to receive access to treatment once incarcerated.
- Black and Native Americans are at higher risk of experiencing violent encounters with law enforcement and are frequently stereotyped as being more likely to engage in violence or drug use.

Public Health vs. Punishment

- People of color experience inequities in the legal system:
 - Who is selected for searches or investigations, who is arrested, who is charged.
- U.S. has the highest rate of incarceration in the world.
 - African and Black Americans are incarcerated in state prisons at a rate 5x higher than white Americans despite similar rates of drug use.
 - Roughly 4 in 5 of those in federal prison and 3 in 5 of those in state prisons for drug-related offenses are Black or Latinx.
 - This reflects a difference in punitive response, rather than a significant difference in substance use.

Trauma for Families

- Roughly one in nine Black children has an incarcerated parent, compared to one in 28 Latinx children and one in 57 white children.
 - Adverse childhood experiences (ACEs), including having an incarcerated parent, will impact the future health of children, families, and communities.
- Between 2007 and 2012, deportations for drug related offenses increased 43%.

Mental Health Burdens and the Police

Police killings and their spillover effects on the mental health of black Americans: a population-based, quasi-experimental study

Jacob Bor, Atheendar S Venkataramani*, David R Williams, Alexander C Tsai*

Interpretation Police killings of unarmed black Americans have adverse effects on mental health among black American adults in the general population. Programmes should be implemented to decrease the frequency of police killings and to mitigate adverse mental health effects within communities when such killings do occur.

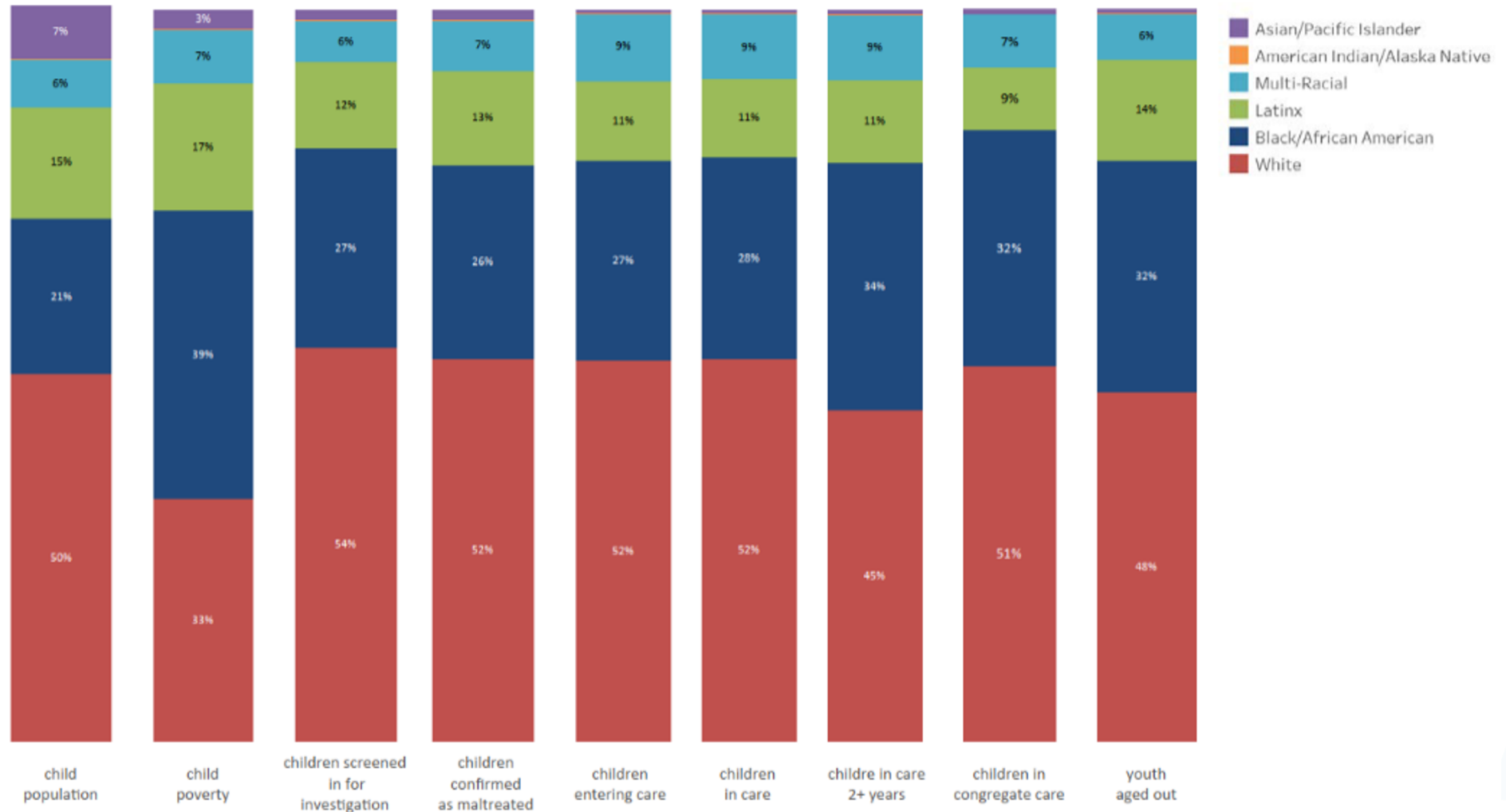
SUD and Benefits Programs

- The Anti Drug Abuse Act of 1988 denied federal benefits to those convicted of drug-related felonies.
- The 1996 Contract with America Advancement Act eliminated Social Security Disability, Supplemental Security Income, and Medicare/Medicaid coverage for those whose disability was caused by a SUD.
- Virginia recently lifted SUD-related bans for SNAP and TANF.

Racial Disproportionality in Child Welfare

- At a national level, Black youth represented approximately 14% of the general population but accounted for 23% of youth in care in 2017.
- 53% of Black youth are subjects of child maltreatment investigations (relative to 34% of the broader population).
- Over one third of removals in 2016 involved parental alcohol use or another substance as a contributing factor.
- This overrepresentation in child welfare systems leads to traumatic consequences for minority populations.

Racial Disproportionality in VA Child Welfare Continuum



Data Sources: Claritas and State-Submitted AFCARS files (FY 2019)

Racial Residential Segregation

- Roughly 35 percent of Black and American Indian/Alaska Native children live in poverty -- triple the rate of white children (11%).
- Low-income parents are more likely to have their child removed based on conditions related to their financial situation (e.g., food insecurity, housing instability, lack of access to proper childcare, lack of access to critical medical services).

Racial Residential Segregation

- “Redlining” systematically denied access to goods and services for communities of color.
- Redlining and other factors led to segregation and divestment from communities with significant Black and indigenous populations.
- Unemployment and reduced access to critical services can worsen health outcomes.
- One study found that over one in four Black and Latinx neighborhoods in three large southern cities had no access to welfare, treatment services, and/or public transportation.

Racial Equity in SUD Referral, Treatment and Recovery

- Mental health providers treat Latinx and white adolescents differently: Providers are less likely to refer Latinx youth to substance use treatment.
- Indigenous populations are more likely to need treatment and less likely to receive it.
- Latinx and Black Americans are most likely to report delays in accessing treatment.

Racial Equity in SUD Referral, Treatment and Recovery

- Implicit bias interferes with physician's ability to accurately assess patient needs due to assumptions about
 - who suffers from addiction,
 - who experiences pain and to what degree,
 - and who requires a punitive approach rather than a therapeutic one.
- For example, Black and Latinx patients are less likely to receive pain medication for pain levels equivalent to white individuals.
 - Roughly half of white medical students believe Black people feel less pain than other races.

Racial Equity in SUD Referral, Treatment and Recovery

- In recovery spaces, African Americans broadly have poorer treatment engagement and retention relative to white people.
 - This is caused by access, socioeconomic status, and other factors.
- Traditional 12-step programs were created by and for white, middle-class, men.
- More culturally-relevant support structures would create a more equitable path for recovery.

Unique Role of Social Work

- At the intersection of individual and environment
- Bridges clinical and community settings
- Engages and empowers
- Doesn't face as much medical mistrust as those who operate in more traditional systems

Why is it important to address implicit bias?

- Workers with cultural bias are susceptible to discriminatory behavior.
- Racial bias may arise in working with families when subjective judgements must be made.
- When evaluating parenting through one's own cultural lens, it is more likely to mischaracterize or attribute negative traits to others.
- Families that have been, or feel that they have been, discriminated against may then have a hard time trusting and collaborating with social workers.

Implicit Bias (individual level)

- The unconscious and below-the-surface attitudes we have towards people
- These biases may be positive or negative
- Individual biases can translate into institutional, system-wide biases and can alienate already marginalized populations

Zoom out: Systemic Racism Recap

How it manifests:

- Racial inequities in the criminal justice and child welfare systems
- Poverty is partially a result of redlining, inequitable policing practices, and insufficient community support resources
- Broadly stigmatizing perspectives shape what is defined as healthy family dynamics

From a practice standpoint:

- How can we incorporate more effective training, behavioral support models, and equitable practice guidelines into our efforts?

Addressing Disproportionality

- Hiring practices
 - Address barrier crimes, and
 - Hire individuals representing the full spectrum of diversity
- Create more standardized practices around referral to treatment
- Imbue cultural humility throughout organizations and practice, including behavioral assessments
- Explicitly grapple with racial equity in worker onboarding and education
- Break out data by race, ethnicity, and other key demographics

Addressing Disproportionality

- Support community-based organizations and culturally appropriate recovery and treatment programs
- Lift up, listen to, and compensate people with lived experience from a variety of backgrounds



Resources

- **Drug Policy Alliance drugpolicy.org**
 - About the Drug War, Criminal Justice Reform, Substance Use Disorder Treatment
- **National Harm Reduction Coalition harmreduction.org**
 - Works to uplift the voices and experiences of people who use drugs, change the stigmatizing narrative about people who use drugs, and bring harm reduction strategies to scale
- **RISE Magazine risemagazine.org**
 - Supports parents' leadership in eliminating cycles of harm in the child welfare system and creating communities that invest in families and offer collective care, healing and support
- **upEND Movement upendmovement.org**
 - A network designed to tap into work already being done and spark new work that will ultimately create a society in which the forcible separation of children from their families is no longer an acceptable solution for families in need